

<div>STANDARD FORM (SF)</div> <div>254</div> <div>Architect-Engineer and Related Services Questionnaire</div>	1. Firm Name/Business Address:		2. Year Present Firm Established:	3. Date Prepared:
	1a. Submittal is for: <input type="checkbox"/> Parent Company <input type="checkbox"/> Branch or Subsidiary Office		4. Specify type of ownership & check below, if applicable CORPORATION	
			<input type="checkbox"/> A. Small Business	
			<input type="checkbox"/> B. Small Disadvantaged Business	
		<input type="checkbox"/> C. Woman-Owned Business		
5. Name of Parent Company, if any:		5a. Former Parent Company Name(s), if any, and Year(s) Established:		
6. Names of not more than Two Principals to Contact: Title/Telephone				
7. Present Offices: City/State/Telephone/No. Personnel Each Office				
7a. Total Personnel _____				
8. Personnel by Discipline: (list each person only once, by primary function.)				
<div><div><input type="checkbox"/> Administration</div><div><input type="checkbox"/> Architects</div><div><input type="checkbox"/> Chemical Engineers</div><div><input type="checkbox"/> Civil Engineers</div><div><input type="checkbox"/> Construction Engineers</div><div><input type="checkbox"/> Draftsmen</div><div><input type="checkbox"/> Ecologists</div><div><input type="checkbox"/> Economists</div></div> <div><div><input type="checkbox"/> Electrical Engineers</div><div><input type="checkbox"/> Estimators</div><div><input type="checkbox"/> Geologists</div><div><input type="checkbox"/> Hydrologists</div><div><input type="checkbox"/> Interior Designers</div><div><input type="checkbox"/> Landscape Architects</div><div><input type="checkbox"/> Mechanical Engineers</div><div><input type="checkbox"/> Mining Engineers</div></div> <div><div><input type="checkbox"/> Oceanographers</div><div><input type="checkbox"/> Planners</div><div><input type="checkbox"/> Sanitary Engineers</div><div><input type="checkbox"/> Soils Engineers</div><div><input type="checkbox"/> Specification Writers</div><div><input type="checkbox"/> Structural Engineers</div><div><input type="checkbox"/> Surveyors</div><div><input type="checkbox"/> Transportation Engineers</div></div> <div><div><input type="checkbox"/> Architectural Intern</div><div><input type="checkbox"/> Part Time Student</div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div></div>				

10. Profile of Firm's Project Experience, Last 5 Years *

Profile Code	Number of Projects	Total Gross Fees (in thousands)	Profile Code	Number of Projects	Total Gross Fees (in thousands)	Profile Code	Number of Projects	Total Gross Fees (in thousands)
1)		\$	11)		\$	21)		
2)		\$	12)		\$	22)		
3)		\$	13)		\$	23)		
4)		\$	14)		\$	24)		
5)		\$	15)		\$	25)		
6)		\$	16)		\$	26)		
7)		\$	17)		\$	27)		
8)		\$	18)			28)		
9)		\$	19)			29)		
10)		\$	20)			30)		

11. Project Examples, Last 5 Years

Profile Code	"P", "C", "JV", or "IE"	Project Name and Location	Owner Name and Address	Cost of Work (in thousands)	Completion Date (Actual or Estimated)
		1		\$	
		2		\$	
		3		\$	
		4		\$	
		5		\$	
		6		\$	
		7		\$	

		8		\$	
		9		\$	
		10		\$	
		11		\$	
		12		\$	
		13		\$	
		14		\$	
		15		\$	
		16		\$	
		17		\$	
		18		\$	
		19		\$	

		20		\$	
		21		\$	
		22		\$	
		23		\$	
		24		\$	
		25		\$	
		26		\$	
		27		\$	
		28		\$	
		29		\$	
		30		\$	

12. The foregoing is a statement of facts.

Signature:_____ Typed Name and Title:_____

Date: